



COMMONWEALTH OF KENTUCKY
Public Protection Cabinet
Department of Housing, Buildings and Construction
DIVISION OF PLUMBING
Boiler Inspection Section
101 Sea Hero Road, Suite 100
Frankfort, Kentucky 40601-5412
(502) 573-1708 Fax (502) 573-1058



BOILER AND PRESSURE VESSEL CONTRACTOR LICENSE APPLICATION

(To install, erect, or repair boilers, pressure vessels, and pressure piping)

Please type or print application. Answer all questions on this application.

A nonrefundable application fee of \$250 payable to Kentucky State Treasurer shall be submitted with this application.

1. Name: _____
Last First MI

Address: _____
(Street, Route or Box Number)

City: _____ State: _____ Zip: _____

County: _____ Telephone: (_____) _____ - _____

Date of Birth: ____ / ____ / ____ Social Security number: ____ - ____ - ____

E-Mail Address: _____

Attach here a recent
passport-sized, color
photograph of applicant
taken within the last six
months.

2. Company Name (If applicable): _____

Address: _____ City: _____
(Street, Route or Box Number)

State: ____ Zip: ____ County: _____ Telephone: (_____) _____ - _____

3. Please indicate to which of the above addresses you prefer to receive mail from the Department: #1: ____ #2: ____

4. How long have you engaged in the installation or repair of boilers or pressure vessels? _____

5. Are you authorized to use all applicable ASME Code Symbol Stamps? Please circle: Y N

6. Are you authorized to use the National Board Repair Symbol Stamp? Please circle: Y N

Applicant's Signature: _____ Date: _____

____ (Initial) I am not in default of any student loans backed by the KHEAA (Kentucky Higher Education Assistance Authority). I understand that if I am in default of any student loans backed by the KHEAA, I cannot receive a Kentucky Owner's Piping Inspector license at this time.

For Office Use Only

Date Received _____
Date Approved _____
Check/Pmt # _____
Date Issued _____
Pending _____
Exam Passed/% _____
License # (if applicable) _____

The applicant, by _____, being duly sworn,
declares that the foregoing statements are true to the best of his/her
knowledge and belief, and that he/she has personally signed this application.

Subscribed and sworn to before me on this the ____ day of _____,
20__.

Notary Public _____ My Commission expires: _____

